HONOLULU ETHICS COMMISSION
925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768
Email: ethics@honolulu.gov
Website: http://www.honolulu.gov/ethics/

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HONOLULU ETHICS COMMISSION RECEIVED
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2019 REGISTRATION

Lobbyist Registration
(Type or Print Clearly)

PART I LOBBYIST

NAME (Last) (First) (Middle) Chung, Ann H.		
LOBBYIST FIRM/EMPLOYER (if applicable) Chung Associates		TELEPHONE 808-351-6000
MAILING ADDRESS (No. and Street or P.O Box) 1732 Laukahi St.		FAX
		EMAIL chungassociatesllc@gmail.com
(City) Hon	(State) HI	(Zip Code) 96821

PART II.A ORGANIZATION

NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate) JS Global Invest Corporation		TELEPHONE 808-627-2605
MAILING ADDRESS (No. and Street or P.O. Box) 1600 Kapiolani Blvd. Ste. 918		FAX
		EMAIL timkerca@gmail.com
(City) Hon	(State) HI	(Zip Code) 96814
ESTIMATED NUMBER OF MEMBERS (if lobbying on behalf of members)		☑ Not Applicable
METHODS USED BY MEMBERS TO MAKE POLICY DECISIONS		☑ Not Applicable

PART II.B NO LONGER LOBBYING

☐ I am no longer authorized to lobby on behalf of the organization in Part II.A	DATE

NOTE: This is a public document.

PART III DESCRIPTION OF SUBJECTS ON WHICH YOU EXPECT TO LOBBY

☑ Business & Economic Development	☑ Community Services	☑ Customer Services
☑ Culture & Arts	☐ Housing	☑ Public Works, Infrastructure & Sustainability
☐ Parks & Recreation	☐ Public Health, Safety & Welfare	☑ Tourism
☑ Transportation	☑ Zoning & Planning	☐ Specific Legislation: ☐ Additional Sheet(s) Attached Bill No. _____(Year)_____ Reso No. _____ Admin. Rule No. _____ Dept._____
☐ Other (indicate below):		

PART IV LOBBYIST CERTIFICATION

I hereby certify that the foregoing statements are true and correct.

LOBBYIST SIGNATURE

notary certificate attached on next page

7/3/19

DATE

Subscribed and sworn to before me

This _____ day of _____, _____.

By:

NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS

My commission expires:

PART V AUTHORIZATION TO LOBBY

NAME: Tim Park	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED: VP
NAME OF ORGANIZATION (if applicable): JS Global Invest Corporation	TELEPHONE: 808-627-2605
MAILING ADDRESS (No. and Street or P.O Box): 1600 Kapiolani Blvd. Ste. 918	FAX:
	EMAIL: timkoka@gmail.com
(City): Hon (State): HI	(Zip Code): 96814

I hereby authorize the above-named person to engage in lobbying activities on behalf of the undersigned.

(Signature of Authorizing Officer or Person Represented) 7/3/19 (Date)

Rev. 11/2018

NOTE: This is a public document.

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State of Hawaii

City and County of Honolulu

On 3rd of July, 2019, before me, Caroline Masao Ziak, personally appeared Ann H. Chung, Personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon the behalf of which the person(s) acted, executed the instrument.

WITNESS, my hand and official seal

Signature _____ *(SEAL)*

Caroline Masao Ziak

Notary Public for the State of Hawaii

My Commission Expired: February 24, 2023

CAROLINE MASAO ZIAK NOTARY PUBLIC No. 19-60 STATE OF HAWAII

CAROLINE MASAO ZIAK NOTARY PUBLIC No. 19-60 STATE OF HAWAII

NOTARY PUBLIC CERTIFICATION

Caroline Masao Ziak First Judicial Circuit

Doc. Description: Honolulu Ethics Commission Lobbyist Registration

No. of Pages: 3 Date of Doc. 07/03/2019

Notary Signature 07/03/2019 Date

ALL PURPOSE ACKNOWLEDGEMENT